

**Summary:** This report contains monthly activity information from the eHealth pilot. The month of June mainly focused on the implementation and monitoring of the pilot. This month started with the monitoring of field workers (FWs), providing basic troubleshooting services to them. Also the Dhaka based monitoring team visited two upazilas from each district this month. For detailed information, please contact the pilot contact point – details can be found at the end of this report.

## Monitoring the Field Workers

As per the monthly visit planning, the Monitoring and Troubleshooting Officers (MTOs) visited each FW twice during the month (each visit is also called a rotation). The visits, or rotations, occur every 15 days of any given month. Since the implementation officially started in the field on 15<sup>th</sup> May, the first rotation was from May 15<sup>th</sup> – 30<sup>th</sup> and the second was from 31<sup>st</sup> May to 15<sup>th</sup> June, etc. During the total implementation period of 3.5 months there will be total seven (7) rotations of visits. During the June rotations the MTOs collected “eToolkit Tracking History”, “Monitoring Information” and “Paper-based Assessments Sheets” for assessing the eLearning course scores.

Within a 30-day timespan, each MTO visited a total of 266 Field Workers (FWs), 148 from Sylhet and 118 from Chittagong. The reason behind not achieving the target of reaching all of the 303 netbook recipients at least once during every rotation, was that all of the MTOs were busy from 5<sup>th</sup> to 9<sup>th</sup> June 2013 arranging the monthly monitoring visit made by the Dhaka team (details of that visit are at the later part of this report). However, the rest of the 37 FWs were visited within the first week of July 2013, and none of the workers missed any visit in the planned rotation.

During the second (1<sup>st</sup>-15<sup>th</sup> June) and third (16<sup>th</sup>-30<sup>th</sup> June) rotation of the month of June, the



MTOs collected eLearning course assessments sheets from 266 FWs among the targeted 303 FWs. The FWs completed the following numbers of eLearning assessments:

- a) MNCH 1: 166;
- b) MNCH 2: 222;
- c) Family Planning 1: 148;
- d) Family Planning 2: 202;
- e) Nutrition 1: 207;
- f) Nutrition 2: 220;
- g) Interpersonal communication and counseling (IPCC): 219 and;
- h) Integrated messaging: 224.

Eminence is keeping track of the number of assessments completed by the FWs. FWs can take each assessment up to four (4) times in order to receive a passing score. They are not required to take the assessment more than once if they score at least 85% on the first attempt. Details of the first, second and third rotation of assessment scores can be found upon request from Eminence.

## Basic Troubleshooting

For the month of June in Chittagong, 18 troubleshooting services were provided to the FWs. The problems reported by the FWs were i) eToolkit icon missing on desktop; ii) Screen not appearing properly; iii) Netbook not charging (MTOs got a call saying that the netbook isn't charging); iv) Netbook freezing; and; v) Keyboard and mouse pad not working.

The problems were mainly reported by HAs. All these problems were solved by i) Reinstalling the eToolkit; ii) Changing the power plug point (When the MTOs went for inspection to find out the reason for this complain they found that the three-pin to two-pin output power outlet converter wasn't working. And that is why the netbook wasn't charging. Point to be noted that during orientation each of the FWs were provided with a three-pin to two-pin output power outlet converter as in Bangladesh the majority of the power outlets are two pin and the charger of the netbooks has three pins. After



realizing the problem respective MTO provided the FW with a new plug point); iii) Restarting the netbook (solved over phone).

In Sylhet, six (6) troubleshooting services were provided to the FWs. The types of problems reported included i) Mouse not working; ii) Netbook freezing and; iii) Keyboard not working. All of the problems from Sylhet were solved over phone.

In addition, there were two netbooks in Chittagong (ID# BKMI 153 and BKMI 112), each being used by one HA and one FWA from Anowara and Hathazari upazila that were severely damaged. The MTOs first tried to solve the problem in the field, but ultimately the netbooks needed to be brought back to Dhaka and given to the vendor for repairs. Both the netbooks were sent back to the field within five (5) working days. In the meantime the FWs were provided with a backup netbook to make sure that they could continue their counseling activities.

### Monthly Monitoring Visit

As part of the implementation phase the monthly monitoring visits took place on June 7<sup>th</sup> and 8<sup>th</sup>, 2013. The Bangladesh Knowledge Management Initiative (BKMI) team including the Bangladesh Centre for Communication Program (BCCP) and Eminence visited four (4) pre-selected upazilas from both Sylhet and Chittagong pilot districts. This visit aimed to get some qualitative information from the FWs, as well as from mothers in the community who have children less than 24 months of age.

During this visit from Sylhet the selected upazilas were Sylhet Sadar and South Surma and from Chittagong the upazila were Patia and Chandanaish. The selection of the workers and the mothers followed a few criteria that can be found at the detailed "Monthly Monitoring Report".

In each district total two (2) FGDs and four (4) KIs



with the FWs. In addition to know more about clients perspective total four (4) observations and four (4) interviews with the mothers of under 2 children took place.

**Experience in using the netbook:** Nearly all of the interviewed FWs were very enthusiastic and excited about using the netbooks. According to them their social status had also improved and they enjoyed the benefits of this in their community and among their peers. Overall, the FWAs or HAs did not seem to face any major problems using the netbook. In a few cases, charging problems were reported because of not having reliable electricity in their house in which case they had to carry the device to the nearest available place for charging. Carrying the netbooks during the rainy season also made some of the FWs nervous of potential damage to the netbook. According to the FWs they use the netbook more during EPI sessions, in satellite clinics and community clinics to ensure counseling coverage with a wider audience

**Experience in using the eToolkit:** The FWs expressed satisfaction about the existing content because according to many, it is making counseling more interesting for their clients. Clients were more interested than before to sit for counseling sessions. According to the FWs, clients are now more interested to learn about long acting and permanent methods, safe delivery, pregnancy care, maternal and child nutrition and IYCF issues. During FGDs, the FWs said that they think the materials in the eToolkit are very effective for helping them to recall their knowledge on maternal child health, nutrition and family planning. The FWs also thought that since a large portion of their clients are illiterate, having more videos and picture-based materials for health education will be of great help and will actually reduce their counseling time efforts.

**Experience in using the eLearning courses:** Both The HAs and FWAs were very pleased by the eLearning course modules and considered it as valuable refresher training, which is what it was intended to, be. The most interesting finding

however was that the FWs were also vastly using, and even preferring, the eLearning videos for counseling their clients. The most popular courses were the Family Planning course, in particular the the section on IUD video and the Nutrition course, in particular the section on IYCF and child positioning.

Most of the FWs had already taken all of the courses, completed each assessment after the courses, and scored 100 percent marks in each course – in some cases after a few attempts. The other videos/courses topics they would like to have in the future are:

- Temporary family planning methods and their side effects
- Extended Program on Immunization (EPI)
- Antenatal check up
- Tetanus toxoid (TT) vaccine
- Adolescent health
- Communicable diseases
- Non-communicable diseases (NCDs)

**Findings from the clients:** The findings from the interviews with clients revealed that they appreciate the netbook as a tool for counseling them. They thought it brought a new dynamic for them combining both entertainments with information. Though this was still early in the pilot, some of the mothers showed some intention to change behavior towards improved health practices. All mothers said that they prefer videos than printed materials when being counseled. They also opted for materials with more photos and less text. Mothers said that they would appreciate videos on childhood illness, how to take care of a child when he/she is sick, male family planning methods, and permanent methods.

For more information on the monthly monitoring visit please contact with the BKMI team.

## Key Challenges

Key challenges faced during this month were the following:

- The strained relationship between the HAs and the FWAs at the field level; FWs insisted that separate meetings be arranged between these two cadres of FWs during both orientation and field visits, creating extra administrative procedures.
- The screen size and sound quality of the netbooks are problematic while doing group counseling.
- Some of the FWs' supervisors were reported to be creating extra administrative processes for the FWs with netbooks because of professional jealousy.

## Next Steps

The next steps of this pilot include the following:

- Monthly field visit rotations by MTOs
- July monitoring visit by the central team, including GoB representatives from IEM, BHE and IPHN
- Orientation of the NHSDP service promoters and counselors from the pilot area clinics.



## Meet the Field Workers

**For more information,  
please contact:**

Shusmita Khan  
Senior Associate  
Coordinator  
Eminence  
Eminence  
3/6, Asad Avenue  
Mohammadpur, Dhaka  
Bangladesh  
[Shusmita@eminence-  
bd.org](mailto:Shusmita@eminence-bd.org)  
+8801713209091 (direct)  
Shusmita.khan (skype)

### Videos made it easy

One of my clients had a baby for the first time and for the first few days after birth the family was complaining that the baby was not getting enough milk. The family took the mother to see a doctor who prescribed her with a baby milk substitute (BMS) consumer product from the market. Since I was visiting my client very regularly during her entire pregnancy period, she consulted with me about giving the baby a BMS product. She also requested me to talk with her mother-in-law who was convinced that the family should start feeding the baby with the BMS product. I immediately went to counsel the family. First they didn't want to believe that a child should not be given a BMS product. But when I showed them the video on breastfeeding practices on the netbook, the family members, especially the mother-in-law, was convinced that breastfeeding was the appropriate way to feed the baby. The family understood that the baby wasn't getting the adequate amount of milk because her positioning and attachment wasn't right. Then she started to feed the baby following the right positioning and attachment and after few days when I went to that mothers' house for a follow up visit I saw that the baby had gained weight and was getting a sufficient amount of breast milk. Both the mother and the baby looked cheerful.

Suchata Bhattacharjee  
Health Assistant (HA)  
21 years of service tenure  
Toker Bazar Union  
Sylhet Sadar  
Sylhet